

| AMENDMENT TRANSMITTAL LETTER | | | | Docket No. 1248-0754PUS1 | |
|--|---|---|-----------------------------------|---------------------------------|-------------|
| Application No. 10/512,057-Conf. #8608 | Filing Date October 21, 2004 | Examiner Q. N. Nguyen | Art Unit 2141 | | |
| Applicant(s): Yoshio TOKUHASHI et al. | | | | | |
| Invention: DEVICE CONTROL MANAGEMENT APPARATUS | | | | | |
| <p>MS AF Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450</p> <p>Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.</p> | | | | | |
| CLAIMS AS AMENDED | | | | | |
| | Claims Remaining After Amendment | Highest Number Previously Paid | Number Extra Claims Present | Rate | |
| Total Claims | 27 | - 27 = | 0 | x 52.00 | 0.00 |
| Independent Claims | 3 | - 3 = | 0 | x 220.00 | 0.00 |
| Multiple Dependent Claims (check if applicable) <input type="checkbox"/> | | | | | |
| Other fee (please specify): | | | | | |
| TOTAL ADDITIONAL FEE FOR THIS AMENDMENT: | | | | | 0.00 |
| <input checked="" type="checkbox"/> Large Entity <input type="checkbox"/> Small Entity <input checked="" type="checkbox"/> No additional fee is required for this amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of \$ _____. A duplicate copy of this sheet is enclosed. <input type="checkbox"/> A check in the amount of \$ _____ is enclosed. <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. <input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <u>02-2448</u> as described below. A duplicate copy of this sheet is enclosed. <input type="checkbox"/> Credit any overpayment. <input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17. | | | | | |
| Charles Gorenstein Attorney Reg. No.: <u>29,271</u> | | | | Dated: <u>December 18, 2008</u> | |
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